

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	03/07/01
FORMALITY REVIEW	H.S.	866	03.15.01
RESPONSE FORMALITY REVIEW	Em	927	06/28/01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
1	03/07/01
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4	03/07/01
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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C.C.
03-16-01